

PROGRESS SHEET - APPLICATION FOR CHANGE ON:

WRIA CHERAN

CS4-SUC 7742e3

WR Doc ID: 4600806

COUNTY CHERAN

NAME: Michael/Martha Buckingham

PHONE: 509.784.1325

ADDRESS: P.O. Box 384

Entiat

WA

98822-0384

City

State

ZIP

PURPOSE OF APPLICATION: Temp Trust Donation (Portion)

Original Right Holder: Colinus

(14807/12042/07742)

Application received: March 12, 2009

date

Initial \$10.00 fee received: () Yes () No

Statement of additional exam fee \$ _____

Sent _____

date

Received _____

date

PUBLICATION:

Approved by: _____

Date _____

Notice Sent _____

date

CONSULTED AGENCIES:

DOH _____

date

DOW _____

date

DOF _____

date

USBR _____

date

TRIBES _____

date

PROTESTS:

By: _____

date

Name

By: _____

date

Name

By: _____

date

Name

Affidavit received: _____

date

Checked by: _____

P.P. time expires: _____

date

Report written by: _____

Date Report Sent: _____

DEVELOPMENT SCHEDULE

Beginning of Construction:

Date sent: _____

Date received: _____

Extensions: _____

Completion of Construction:

Date sent: _____

Date received: _____

Extensions: _____

Proof of Appropriation:

Date sent: _____

Date received: _____

Extensions: _____

Date well report(s) received: _____

DATE APPROVED FOR CHANGE: _____

BY: _____

() Superseding Permit: _____

() Superseding Certificate: _____

() Certificate of Change (on claims)

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Date certificate fees requested: _____

Date received: _____

DATE CHANGE ISSUED: WITHDRAWN 10-14-2011

REMARKS: VIA EMAIL